



PTO/SB/21 (04-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/215,421
Filing Date	December 18, 1998
First Named Inventor	Chang, Paul
Art Unit	2664
Examiner Name	W.C. Schultz
Attorney Docket Number	016845-00030005

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Total Number of Pages in This Submission

**ENCLOSURES (Check all that apply)**

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication<br>to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to TC<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below):<br>Return Postcard |
|--|--|---|

Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Townsend and Townsend and Crew LLP David N. Slone	Reg. No. 28,572
Signature	<i>David N. Slone</i>	
Date	October 18, 2004	

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	M. Diane Dubé		
Signature	<i>M. Diane Dubé</i>	Date	10/18/04



# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 225

Complete if Known

Application Number	09/215,421
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First Named Inventor	Chang, Paul
Examiner Name	W.C. Schultz
Art Unit	2664
Attorney Docket No.	016845-000300US

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METHOD OF PAYMENT (check all that apply)				
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account:				
Deposit Account Number	20-1430			
Deposit Account Name	Townsend and Townsend and Crew LLP			
The Director is authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below				
<input checked="" type="checkbox"/> Credit any overpayments				
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)				
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				
FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
		1001	790	Utility filing fee
		1002	350	Design filing fee
		1003	550	Plant filing fee
		1004	790	Reissue filing fee
		1005	160	Provisional filing fee
SUBTOTAL (1)				(\$)
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Total Claims		Extra Claims	Fee from below	Fee Paid
Independent Claims				
Multiple Dependent				
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
		1202	18	Claims in excess of 20
		1201	88	Independent claims in excess of 3
		1203	300	Multiple dependent claim, if not paid
		1204	88	** Reissue independent claims over original patent
		1205	18	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$)

\*\*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES				
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
		1051	130	Surcharge - late filing fee or oath
		1052	50	Surcharge - late provisional filing fee or cover sheet
		1053	130	Non-English specification
		1812	2,520	For filing a request for ex parte reexamination
		1804	920*	Requesting publication of SIR prior to Examiner action
		1805	1,840*	Requesting publication of SIR after Examiner action
		1251	110	Extension for reply within first month
		1252	430	Extension for reply within second month
		1253	980	Extension for reply within third month
		1254	1,530	Extension for reply within fourth month
		1255	2,080	Extension for reply within fifth month
		1401	340	Notice of Appeal
		1402	340	Filing a brief in support of an appeal
		1403	300	Request for oral hearing
		1451	1,510	Petition to institute a public use proceeding
		1452	110	Petition to revive - unavoidable
		1453	1,330	Petition to revive - unintentional
		1501	1,370	Utility issue fee (or reissue)
		1502	490	Design issue fee
		1503	660	Plant issue fee
		1460	130	Petitions to the Commissioner
		1807	50	Processing fee under 37 CFR 1.17(q)
		1806	180	Submission of Information Disclosure Stmt
		8021	40	Recording each patent assignment per property (times number of properties)
		1809	790	Filing a submission after final rejection (37 CFR § 1.129(a))
		1810	790	For each additional invention to be examined (37 CFR § 1.129(b))
		1801	790	Request for Continued Examination (RCE)
		1802	900	Request for expedited examination of a design application
Other fee (specify) _____				
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3)
				(\$)225

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	David N. Slone	Registration No. (Attorney/Agent)	28,572
Signature	David Slone	Telephone	650-326-2400
		Date	October 18, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.